

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

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GUY P. JONES
EDITOR

Investigations of Public Health Problems

A report of considerable interest recently submitted to congress by Surgeon General H. S. Cumming of the U. S. Public Health Service sets forth the research work conducted by that service during the past fiscal year. The studies of public health problems by the Public Health Service are conducted through the Hygienic Laboratory at Washington and various field stations of a more temporary nature in different parts of the country. A number of subjects under investigation last year proved to be extremely profitable and important fields for research, and investigations have been carried on along lines suggested by previous results.

While the disease known as Rocky Mountain spotted fever is no longer the deadly menace that it used to be, thanks to the protective vaccine devised by workers of the Public Health Service, there is evidence that the area of its distribution is considerably wider than was formerly supposed. The opening up of the country may also be expected to increase, at least temporarily, the exposure of persons to this disease. By analogy with other diseases, however, the ultimate reduction and virtual disappearance of this condition may be expected as a result of the intensive occupation of the land by an increased population. In the meantime, there is abundant opportunity for continued study in this field, since no means have as yet been discovered for eradicating the disease among the small animals which constitute the natural reservoirs of the infection, and since laboratory studies of

the reputed cause of the disease have thus far failed to show conclusive results. The manufacture and distribution of the preventive vaccine developed by the Public Health Service have been continued and increased. Vaccine sufficient to vaccinate 5000 persons has been dispensed but the results following its use, while excellent, have not been completely assembled.

The cancer studies of the Public Health Service have been continued both at a field station and at the Hygienic Laboratory. While no startling discoveries have resulted, some solid contributions to our knowledge of this disease have been made.

Stream pollution investigations, with headquarters at the laboratory in Cincinnati, have continued to yield valuable results. This station is looked upon as a chief source in this country for information on underlying scientific principles relating to the effect of various kinds of pollution of streams and on the processes of natural and artificial purification which render the water susceptible of subsequent use for drinking purposes. A number of articles on the technical aspects of this subject have been published during the year.

For the first time in a number of years a definite increase of malaria has been observed in certain areas. This phenomenon has increased interest in the malaria problem, and studies are under way to determine its cause and to devise means for combating it. The use of paris green for the control of malaria-carrying mosquitoes has been shown to have much wider appli-

cation than was formerly supposed. Much work has been done on the application of this substance to breeding areas by means of inexpensive power hand-blowers to be used either from boats or from the shore in connection with portable equipment which would come within the means of almost any community. Gratifying progress has been made in the study of larvicides and new remedies for malaria. A trial of these various methods of malaria control will be made during the year on a county-wide scale in two widely separated counties.

The studies of the salt marsh mosquito problem have been completed. The report under preparation will be comprehensive and will include descriptions of the various kinds of breeding places of these mosquitoes; an enumeration of their species, habits and distribution; an estimate of the extent of the problem and various means of control which have been found effective in various places and under different circumstances.

The industrial hygiene studies made during the year have been most successful. These have included studies of tetraethyl lead gasoline, of occupational health hazards, of industrial poisons, and of industrial morbidity and mortality, as well as of daylight illumination by means of a special cabinet. The last named studies were particularly unique and interesting.

There occurred during the past year a number of serious epidemics of meningococcus meningitis (cerebrospinal meningitis). Observations of the specific serum used in the treatment of this disease showed that the results were unequal or irregular, and a vigorous attempt is being made to improve the therapeutic efficiency of this serum. This is an extensive undertaking since strains of meningococci must be selected from various epidemics and studied as to their pathogenic and immunizing properties.

The report mentioned deals with numerous other studies of public health problems that are being conducted by the Public Health Service.

SALINAS PUNISHES QUARANTINE BREAKER

A resident of Salinas whose home was quarantined because of scarlet fever was fined twenty dollars, recently, for failure to observe the quarantine regulations. City Health Officer S. F. Butler was the complaining witness before Judge Ernest Bedolla.

Pure science is high religion incarnate.—*Lippmann*.

THE DIFFERENCE BETWEEN SMALLPOX AND CHICKENPOX

A new edition of Special Bulletin No. 6 of the State Department of Public Health entitled, "The Chief Points of Difference Between Smallpox and Chickenpox," has just been issued. This bulletin will be of particular use to health officers, at the present time, because of the increased numbers of cases of both chickenpox and smallpox that are being reported. One of the important points of difference in these two diseases is the difference in the distribution of the rash. The rash of smallpox prefers the extensor and unprotected surfaces and does not like the protected parts. Except for its selection of the trunk, in general, chickenpox shows no such preference. A table is included in this bulletin, which outlines very clearly and in minute detail the differences in the distribution of the rashes in these two diseases. The following quotation relative to other factors besides distribution appears in this bulletin:

"Although a great deal of weight has been given to the distribution of the rash, it must not for a moment be thought that diagnosis can always be made upon this alone. Other factors are of great importance: The similarity or dissimilarity of the lesions over any one area; the travel of the rash over the body; the onset, growth and decline of an individual lesion; the history of the prodromal illness; the evidence of recent successful smallpox immunization, are all very important factors. However, in many of these, information can only be obtained by questioning the patient, and those around him. In investigating the epidemic diseases, the more people that one interviews with regard to the sequence of past events during the progress of a case, even of that during the immediately preceding days, the more is he impressed with the relative worthlessness of this hearsay evidence when compared with the weight of his own personal observation. One writer has said that these diseases write in hieroglyphics upon the skin. The personal observation and study of one trained in reading these hieroglyphics of eruptive diseases should be of greater weight in telling him what they indicate, than all that any untrained observer may tell him of what appeared to the untrained eye to occur during the time they were being written by the disease."

Signs of no Relative Value

Through a lack of familiarity with these diseases much weight appears to have been given by physicians in general to secondary fever, umbilication of pustule, shot-like feel, and other signs which have been

WIPING RAGS MUST BE STERILIZED

The law requires that every person (or corporation) who supplies employees with wiping rags, or who sells or offers for sale any wiping rags, soiled wearing apparel, underclothing, bedding, or parts of soiled or used underclothing, wearing apparel, bed clothes, bedding, or soiled rags and cloths, shall have same sterilized by process of boiling for forty minutes in a solution containing five per cent of caustic soda, and before such boiling the sleeves, legs and bodies of garments must be ripped and made into flat pieces.

Wiping rags are defined as "cloths and rags used for wiping and cleaning the surfaces of machinery, machines, tools, locomotives, engines, motor cars, automobiles, cars, carriages, windows, and furniture, and surfaces of articles, appliances and engines in factories, shops, steamships and steamboats and generally used for cleaning purposes in industrial employments, and also used by mechanics and workmen for wiping from their hands and bodies soil incident to their employment."

Under section 4 of this law, every peace officer, health officer, or health inspector, upon proper demand and notice of their authority, shall be permitted during business hours to enter factories, shops, yards, ships, boats, and premises where wiping rags are used, kept for sale, or offered for sale, and shall inspect such wiping rags. The act further empowers counties, cities and towns, to regulate the wiping rag business with the issuance of certificates of inspection of wiping rags offered for sale. The board of health, department or health officer authorized to issue permits to launder, sterilize or sell wiping rags, shall keep a register of names of persons to whom such permits are issued.

Before being sold or offered for sale, every package or parcel of wiping rags must be plainly marked "sterilized wiping rags," with the number and date of permit given for the conduct of the laundry in which the rags in such package or parcel were laundered and sterilized, and the name of the board of health or health officer issuing the permit, or with

placed together in the table, as being of no relative value in diagnosis. Any or all of these may occur in a given case; however they have been so universally absent during the present epidemic that their evidence is of little or no value. *Distribution, appearance, and history* will have clinched the diagnosis before any evidence, which may be offered by these other signs, can be given; their presence or absence is of no importance."

the name and location of the laundry in which such rags were laundered and sterilized.

Health officers throughout the state are requested to make every effort to secure the full compliance with the provisions of this law. Any health officer who may learn of any parcels of wiping rags received in the territory which is under his jurisdiction, and which package or parcel is not properly labeled, is requested to advise the State Department of Public Health of any such noncompliance with the law. Full information should also be obtained relative to the location from where such wiping rags were shipped.

APPLICATIONS FOR SEWAGE DISPOSAL

PERMITS PENDING

The following applications for sewage disposal permit are pending before the State Board of Public Health, final action to be taken at the next meeting of the board, to be held in room 335 State Building, San Francisco, on March 8, 1930:

CARPINTERIA, CARPINTERIA SANITARY DISTRICT—Application for permit to discharge untreated sewage through a pressure line into Pacific Ocean, 2500 feet beyond low tide.

SAN CLEMENTE—Application for permit to construct sewerage works and dispose of raw sewage into Pacific Ocean, 3800 feet off shore.

Broad culture, which in itself almost connotes breadth of vision, and high professional ideals, are two things which are in danger of being lost sight of in current medical education, and as they become less distinguishing characteristics of the profession, its prestige is sure to suffer.—*Thomas B. Cooley*.

MORBIDITY*

Diphtheria.

62 cases of diphtheria have been reported, as follows: Alameda County 7, Hayward 3, Oakland 3, Reedley 1, El Centro 2, Los Angeles County 6, Glendale 1, Long Beach 2, Los Angeles 16, Montebello 4, Pasadena 1, Santa Monica 2, Monterey Park 1, Merced County 1, Santa Ana 3, San Diego County 1, Escondido 1, San Francisco 1, San Mateo 1, Santa Clara County 1, San Jose 1, Solano County 1, Tulare County 1, Visalia 1.

Scarlet Fever.

340 cases of scarlet fever have been reported, as follows: Alameda County 2, Hayward 2, Oakland 11, San Leandro 1, Colusa County 8, Pittsburg 1, Placerville 1, Fresno County 3, Fresno 2, Humboldt County 1, Eureka 4, Brawley 1, Kern County 5, Bakersfield 3, Los Angeles County 26, Beverly Hills 2, Claremont 1, Glendale 3, Hermosa 1, Huntington Park 1, Inglewood 1, Long Beach 3, Los Angeles 95, Pasadena 3, San Fernando 1, San Gabriel 2, Santa Monica 5, South Pasadena 1, Hawthorne 5, South Gate 3, Monterey Park 2, Maywood 9,

*From reports received on February 10th and 11th for week ending February 8th.

Madera County 1, Madera 2, Merced County 1, Merced 1, Monterey County 2, Pacific Grove 2, Salinas 2, Orange County 8, Santa Ana 2, Tustin 1, Riverside County 1, Sacramento County 2, Sacramento 6, San Benito 1, Escondido 9, San Diego 5, San Francisco 15, San Joaquin County 4, San Luis Obispo County 3, Arroyo Grande 8, San Mateo 7, Daly City 2, Lompoc 1, Santa Clara County 5, Palo Alto 1, Shasta County 1, Siskiyou County 26, Sonoma County 3, Petaluma 1, Stanislaus County 1, Turlock 3, Red Bluff 3, Yuba County 1.

Measles.

943 cases of measles have been reported, as follows: Berkeley 9, Oakland 154, San Leandro 2, Contra Costa County 3, Antioch 3, El Cerrito 1, Richmond 3, Walnut Creek 1, Fresno 1, Humboldt County 1, Imperial County 1, Brawley 4, Los Angeles County 57, El Monte 1, Long Beach 2, Los Angeles 48, Montebello 1, Pasadena 5, San Gabriel 5, South Gate 1, Marin County 2, Corte Madera 1, Ross 1, Merced County 3, Pacific Grove 1, Fullerton 2, Riverside County 11, Riverside 2, Sacramento County 3, San Diego 3, San Francisco 444, San Joaquin County 5, Lodi 20, San Luis Obispo County 3, San Mateo County 2, Daly City 2, Redwood City 1, San Bruno 1, San Mateo 1, Santa Barbara County 4, Lompoc 1, Santa Clara County 6, Gilroy 1, San Jose 67, Sunnyvale 3, Santa Cruz County 1, Siskiyou County 1, Yreka 6, Vallejo 1, Sonoma County 34, Petaluma 3, Marysville 4.

Smallpox.

109 cases of smallpox have been reported, as follows: Berkeley 2, Hayward 1, Oakland 5, Brawley 12, El Centro 10, Imperial 4, Lake County 3, Lakeport 14, Los Angeles County 1, Los Angeles 6, Pasadena 2, Whittier 6, Torrance 5, Riverside County 2, Riverside 4, Sacramento County 1, Sacramento 3, Redlands 14, San Francisco 1, Stockton 2, Santa Clara County 1, San Jose 2, Shasta County 1, Sierra County 1, Yreka 1,

Sonoma County 1, Yuba County 1, Marysville 1, Wheatland 1, California 1.**

Typhoid Fever.

6 cases of typhoid fever have been reported, as follows: Eureka 1, Sacramento County 1, Santa Clara County 1, Siskiyou County 1, Stanislaus County 1, California 1.**

Whooping Cough.

132 cases of whooping cough have been reported, as follows: Berkeley 2, Hayward 3, Pittsburg 4, Kern County 4, Kings County 2, Los Angeles County 18, Inglewood 4, Long Beach 21, Los Angeles 28, South Pasadena 1, Whittier 1, South Gate 2, Maywood 1, Sausalito 3, Orange County 13, Huntington Beach 3, Santa Ana 1, Sacramento 1, San Diego 12, San Francisco 2, Stockton 3, Santa Barbara 1, Tuolumne County 2.

Meningitis (Epidemic).

12 cases of epidemic meningitis have been reported, as follows: Richmond 1, Los Angeles 3, Madera County 1, Merced County 1, Escondido 1, San Diego 1, Paso Robles 1, Palo Alto 1, Siskiyou County 1, Vallejo 1.

Encephalitis (Epidemic).

Sacramento County reported 1 case of epidemic encephalitis.

Trichinosis.

Nevada County reported 6 cases of trichinosis.

Jaundice (Epidemic).

Alameda County reported 2 cases of epidemic jaundice.

** Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1930			1929				
	Week ending		Reports for week ending Feb. 8 received by Feb. 11	Week ending		Reports for week ending Feb. 9 received by Feb. 13		
	Jan. 18	Jan. 25		Feb. 1	Jan. 19	Jan. 26		
Botulism	0	0	0	0	0	0	2	
Chickenpox	478	489	619	499	295	276	380	
Coccidioidal Granuloma	0	0	0	0	0	0	3	
Diphtheria	106	86	72	62	76	83	68	
Dysentery (Amoebic)	1	1	1	2	1	1	0	
Dysentery (Bacillary)	0	0	0	0	1	0	0	
Encephalitis (Epidemic)	0	3	2	1	4	1	2	
Erysipelas	28	18	17	24	19	18	16	
Food Poisoning	0	0	0	0	5	0	2	
German Measles	17	21	61	37	12	13	20	
Gonococcus Infection	100	121	116	126	109	127	160	
Hookworm	0	2	0	0	0	0	1	
Influenza	117	51	47	63	564	251	193	
Jaundice (Epidemic)	1	0	0	2	0	0	1	
Leprosy	1	1	0	0	0	0	0	
Malaria	0	2	0	0	2	0	0	
Measles	499	641	889	943	35	29	82	
Meningitis (Epidemic)	18	14	5	12	3	19	18	
Mumps	573	544	646	758	223	267	230	
Ophthalmia Neonatorum	1	1	0	0	2	1	1	
Paratyphoid Fever	1	0	1	1	2	2	0	
Pellagra	0	0	1	1	1	0	1	
Pneumonia (Lobar)	102	96	98	104	86	67	156	
Poliomyelitis	3	2	7	0	1	3	3	
Rabies (Animal)	14	20	21	16	10	12	21	
Scarlet Fever	320	387	358	340	387	353	393	
Smallpox	182	155	139	109	60	45	70	
Syphilis	132	164	146	203	129	175	176	
Tetanus	1	1	1	0	1	0	3	
Trachoma	6	3	3	4	0	2	5	
Trichinosis	4	7	4	6	0	0	0	
Tularemia	1	0	2	0	0	0	0	
Tuberculosis	192	171	184	178	250	217	276	
Typhoid Fever	3	3	8	6	5	9	7	
Undulant Fever	2	0	2	0	0	0	1	
Whooping Cough	119	156	96	132	226	187	216	
Totals	3,022	3,159	3,546	3,629	2,509	2,158	2,503	
							1,899	